

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 4		
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE20-99-D-0066</div>			2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0005</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2003JUL30</div>		4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DXA5</div>			
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CAC-A CHERYL CALLISON (309)782-4843 ROCK ISLAND IL 61299-7630 EMAIL: CALLISONC@RIA.ARMY.MIL			CODE <div style="border: 1px solid black; padding: 2px;">W52H09</div>		7. ADMINISTERED BY (If other than 6) <div style="border: 1px solid black; padding: 2px;">DCMA VAN NUYS 6230 VAN NUYS BLVD VAN NUYS CA 91401-2713</div>			CODE <div style="border: 1px solid black; padding: 2px;">S0512A</div>		8. DELIVERY FOB  <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)</div>		
9. CONTRACTOR  <div style="border: 1px solid black; padding: 2px;">NAME AND ADDRESS  CADILLAC GAGE TEXTRON HR TEXTRON/CADILLAC GAGE TEXTRON 25200 W. RYE CANYON RD. SANTA CLARITA, CA. 91355</div>			CODE <div style="border: 1px solid black; padding: 2px;">OHMS1</div>		FACILITY <div style="border: 1px solid black; padding: 2px;"></div>		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		11. X IF BUSINESS IS <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED</div>			
TYPE BUSINESS: Large Business Performing in U.S.			12. DISCOUNT TERMS <div style="border: 1px solid black; padding: 2px;"></div>		13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div>							
14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			CODE <div style="border: 1px solid black; padding: 2px;"></div>		15. PAYMENT WILL BE MADE BY <div style="border: 1px solid black; padding: 2px;">DFAS COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS PO BOX 182381 COLUMBUS OH 43218-2381</div>				CODE <div style="border: 1px solid black; padding: 2px;">HQ0339</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER <div style="border: 1px solid black; padding: 2px;">DELIVERY/ CALL <input checked="" type="checkbox"/> X  PURCHASE  THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.  Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</div>												
NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYYYMMDD) _____ <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:</div>												
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  KIND OF CONTRACT: Supply Contracts and Priced Orders										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA DAVE ELLIOTT /SIGNED/ ELLIOTTD@RIA.ARMY.MIL (309) 782-3814 BY: _____ CONTRACTING/ORDERING OFFICER				25. TOTAL \$33,663.00		
27a. QUANTITY IN COLUMN 20 HAS BEEN <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED</div>												
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE						28. SHIP. NO. <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</div>		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS				31. PAYMENT <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</div>		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.										34. CHECK NUMBER		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER								35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE20-99-D-0066/0005 <b>MOD/AMD</b>	<b>Page</b> 2 <b>of</b> 4
<b>Name of Offeror or Contractor:</b> CADILLAC GAGE TEXTRON		

SUPPLEMENTAL INFORMATION

- 1. DELIVERY ORDER 0005 IS FOR THE AWARD OF 420 EACH CONNECTOR, RECEPTACLE, PART NUMBER 12321160, NSN: 5935-01-184-1679
- 2. DELIVERIES ARE FOB ORIGIN. THE SHIP TO ADDRESS IS SHOWN IN SCHEDULE B.
- 3. THE UNIT PRICE FOR THIS QUANTITY AND ORDERING PERIOD IS \$80.15 EACH. THE TOTAL AMOUNT OF THIS DELIVERY ORDER IS \$33,663.00

\*\*\* END OF NARRATIVE A 001 \*\*\*

Name of Offeror or Contractor: CADILLAC GAGE TEXTRON

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 5935-01-184-1679 FSCM: 19200 PART NR: 12321160 SECURITY CLASS: Unclassified				
0001AA	<u>PRODUCTION QUANTITY</u>  NOUN: CONNECTOR,RECEPTACL PRON: M131A415M1 PRON AMD: 01 ACRN: AA AMS CD: 070011JEGB4  <u>Packaging and Marking</u>  <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W52H093209H679 W25G1U J 2 <u>DEL REL CD QUANTITY DEL DATE</u> 001 420 31-DEC-2003  FOB POINT: Origin  SHIP TO: <u>PARCEL POST ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001  <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-99-D-0066/0005	420	EA	\$ 80.15000	\$ 33,663.00

**CONTINUATION SHEET**

Reference No. of Document Being Continued

Page 4 of 4

**PIIN/SIIN** DAAE20-99-D-0066/0005

**MOD/AMD**

**Name of Offeror or Contractor:** CADILLAC GAGE TEXTRON

## CONTRACT ADMINISTRATION DATA

LINE	PRON/	OBLG						JOB				OBLIGATED	
ITEM	AMS CD	ACRN	STAT	ACCOUNTING CLASSIFICATION				ORDER	ACCOUNTING				
								NUMBER	STATION			AMOUNT	
0001AA	M131A415M1	AA	2	97	X4930AC6G	6D	26FB	S11116	W52H09	\$		33,663.00	
070011JEBG4													
										TOTAL	\$		33,663.00

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC6G	6D	26FB S11116	W52H09	\$ <u>33,663.00</u>
						TOTAL	\$ 33,663.00